

<b>United States Bankruptcy Court Northern District of Illinois</b>							<b>Voluntary Petition</b>		
Name of Debtor (if individual, enter Last, First, Middle): <b>Popov, Dimitar</b>				Name of Joint Debtor (Spouse) (Last, First, Middle):					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>dba International Cargo Carriers Inc</b>				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):					
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>0628</b>				Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):					
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>905 Center St, #209 Des Plaines, IL</b>				Street Address of Joint Debtor (No. & Street, City, State & Zip Code):					
ZIPCODE <b>60016</b>				ZIPCODE					
County of Residence or of the Principal Place of Business: <b>Cook</b>				County of Residence or of the Principal Place of Business:					
Mailing Address of Debtor (if different from street address)				Mailing Address of Joint Debtor (if different from street address):					
ZIPCODE				ZIPCODE					
Location of Principal Assets of Business Debtor (if different from street address above):									
ZIPCODE									
<b>Type of Debtor</b> (Form of Organization) (Check <b>one</b> box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) _____			<b>Nature of Business</b> (Check <b>one</b> box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other _____ <b>Tax-Exempt Entity</b> (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).			<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check <b>one</b> box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding _____ <b>Nature of Debts</b> (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.			
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					<b>Chapter 11 Debtors</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. ----- <b>Check all applicable boxes:</b> <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).				
<b>Statistical/Administrative Information</b> <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.									<b>THIS SPACE IS FOR COURT USE ONLY</b>
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000									
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1 million to \$10 million <input type="checkbox"/> \$10 million to \$50 million <input type="checkbox"/> \$50 million to \$100 million <input type="checkbox"/> \$100 million to \$500 million <input type="checkbox"/> \$500,000 to \$1 billion <input type="checkbox"/> More than \$1 billion									
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1 million to \$10 million <input type="checkbox"/> \$10 million to \$50 million <input type="checkbox"/> \$50 million to \$100 million <input type="checkbox"/> \$100 million to \$500 million <input type="checkbox"/> \$500,000 to \$1 billion <input type="checkbox"/> More than \$1 billion									

<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s): <b>Popov, Dimitar</b>	
<b>Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>None</b>		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>None</b>		Case Number:	Date Filed:
District:		Relationship:	Judge:
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.  <b>X /s/ Nicolette Robovsky</b> <b>2/27/09</b> Signature of Attorney for Debtor(s) Date	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?  <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)  <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition.  If this is a joint petition:  <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)  <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)  <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  _____ (Name of landlord or lessor that obtained judgment)  _____ (Address of landlord or lessor)  <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and  <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.  <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): <b>Popov, Dimitar</b>
<b>Signatures</b>		
<b>Signature(s) of Debtor(s) (Individual/Joint)</b> I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  <b>X</b> <u>/s/ Dimitar Popov</u> Signature of Debtor <b>Dimitar Popov</b>  <b>X</b> _____ Signature of Joint Debtor  _____ Telephone Number (If not represented by attorney) <b>February 27, 2009</b> Date	<b>Signature of a Foreign Representative</b> I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only <b>one</b> box.)  <input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.  <input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.  <b>X</b> _____ Signature of Foreign Representative  _____ Printed Name of Foreign Representative  _____ Date	
<b>Signature of Attorney*</b>  <b>X</b> <u>/s/ Nicolette Robovsky</u> Signature of Attorney for Debtor(s)  <b>Nicolette Robovsky 6278336</b> <b>Gleason &amp; Gleason</b> <b>77 W Washington, Ste 1218</b> <b>Chicago, IL 60602</b> <b>(312) 578-9530 Fax: (312) 578-9524</b>  <b>February 27, 2009</b> Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	<b>Signature of Non-Attorney Petition Preparer</b> I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.  _____ Printed Name and title, if any, of Bankruptcy Petition Preparer  _____ Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)  _____ Address  _____  <b>X</b> _____ Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.  _____ Date  Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:    If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. <i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.</i>	
<b>Signature of Debtor (Corporation/Partnership)</b> I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.  The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.  <b>X</b> _____ Signature of Authorized Individual  _____ Printed Name of Authorized Individual  _____ Title of Authorized Individual  _____ Date		

B201 (12/08)

UNITED STATES BANKRUPTCY COURT

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

**X** \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read this notice.

**Popov, Dimitar**  
Printed Name(s) of Debtor(s)

**X /s/ Dimitar Popov**  
Signature of Debtor

**2/27/2009**  
Date

Case No. (if known) \_\_\_\_\_

**X** \_\_\_\_\_  
Signature of Joint Debtor (if any)

Date

IN RE Popov, Dimitar

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Residence at: 905 Center St, #209 Des Plaines, IL 60016		J	250,000.00	249,840.00
TOTAL			250,000.00	

(Report also on Summary of Schedules)

IN RE Popov, Dimitar

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X	3 Checking accounts		1,000.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X	Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.		1,500.00
4. Household goods and furnishings, include audio, video, and computer equipment.	X			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X	Clothes		300.00
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X	Term life - no cash value		0.00
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

IN RE Popov, Dimitar

Case No.

Debtor(s)

(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	<b>X</b>			
16. Accounts receivable.	<b>X</b>			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>08 Volvo 670 Semi-Truck</b>		<b>105,975.00</b>
		<b>2000 Volo 610 Semi-truck</b>		<b>15,000.00</b>
		<b>2001 Freightliner Class Century Semi Truck</b>		<b>15,000.00</b>
		<b>2008 Subaru Tribeca</b>		<b>12,500.00</b>
		<b>97 Toyota Camry</b>		<b>1,000.00</b>
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.	<b>X</b>			
29. Machinery, fixtures, equipment, and supplies used in business.	<b>X</b>			
30. Inventory.	<b>X</b>			



IN RE Popov, Dimitar

Debtor(s)

Case No.

(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			
<b>TOTAL</b>				<b>152,275.00</b>

IN RE Popov, Dimitar

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

(Check one box)

☐ 11 U.S.C. § 522(b)(2)☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE A - REAL PROPERTY</u></b>			
Residence at: 905 Center St, #209 Des Plaines, IL 60016	735 ILCS 5 §12-901	15,000.00	250,000.00
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
3 Checking accounts	735 ILCS 5 §12-1001(b)	1,000.00	1,000.00
Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.	735 ILCS 5 §12-1001(b)	1,500.00	1,500.00
Clothes	735 ILCS 5 §12-1001(a)	300.00	300.00
08 Volvo 670 Semi-Truck	735 ILCS 5 §12-1001(b)	500.00	105,975.00
2000 Volo 610 Semi-truck	735 ILCS 5 §12-1001(b)	250.00	15,000.00
2001 Freightliner Class Century Semi Truck	735 ILCS 5 §12-1001(b)	250.00	15,000.00
2008 Subaru Tribeca	735 ILCS 5 §12-1001(c)	2,400.00	12,500.00
97 Toyota Camry	735 ILCS 5 §12-1001(b)	200.00	1,000.00

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 10170301 <b>Chase Auto</b> <b>600 Community Drive</b> <b>Manhasset, NY 11030</b>		<b>Installment account opened 8/07</b>  VALUE \$ 12,500.00				14,020.00	1,520.00
ACCOUNT NO. 905774899-00026 <b>Fifth Third Bank</b> <b>Po Box 630337</b> <b>Cincinnati, OH 45263</b>		<b>Business loan. Secured by 2000 Volvo</b> <b>610 and 2001 Freightliner Semi-trucks.</b>  VALUE \$ 30,000.00				30,000.00	
ACCOUNT NO. <b>Fifth Third Bank</b> <b>346 W North Ave</b> <b>Elmhurst, IL 60126</b>		<b>Assignee or other notification for:</b> <b>Fifth Third Bank</b>  VALUE \$					
ACCOUNT NO. 4330005789784 <b>National City Mortgage</b> <b>Po Box 1820</b> <b>Dayton, OH 45401</b>	X J	<b>1st Mortgage account opened 4/06.</b> <b>Secured by Residence at: 905 Center St,</b> <b>#209, Des Plaines, IL 60016</b>  VALUE \$ 250,000.00				199,600.00	
Subtotal (Total of this page)						\$ 243,620.00	\$ 1,520.00
Total (Use only on last page)						\$	\$

1 continuation sheets attached

(Report also on  
Summary of  
Schedules.)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

IN RE Popov, Dimitar

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBITOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. <b>448961984019</b> <b>Natl Cty Crd</b> <b>4661 E Main St</b> <b>Columbus, OH 43213</b>		<b>Revolving account opened 4/06. 2nd mortgage. Secured by Residence at: 905 Center St, #209, Des Plaines, IL 60016</b>  VALUE \$ <b>250,000.00</b>				<b>50,240.00</b>	
ACCOUNT NO. <b>10201157</b> <b>Toyota Financial Services</b> <b>Commerical Finance</b> <b>Dept 2431</b> <b>Carol Stream, IL 60132-2431</b>		<b>loan on commerical semi truck</b>  VALUE \$ <b>105,975.00</b>				<b>122,399.00</b>	<b>17,944.00</b>
ACCOUNT NO.  		  VALUE \$					
ACCOUNT NO.  		  VALUE \$					
ACCOUNT NO.  		  VALUE \$					
ACCOUNT NO.  		  VALUE \$					
ACCOUNT NO.  		  VALUE \$					
ACCOUNT NO.  		  VALUE \$					
Subtotal (Total of this page)						\$ <b>172,639.00</b>	\$ <b>17,944.00</b>
Total (Use only on last page)						\$ <b>416,259.00</b>	\$ <b>19,464.00</b>

Sheet no. 1 of 1 continuation sheets attached to  
Schedule of Creditors Holding Secured Claims(Report also on  
Summary of  
Schedules.)(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

- ☐ **Domestic Support Obligations**  
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
- ☐ **Extensions of credit in an involuntary case**  
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
- ☐ **Wages, salaries, and commissions**  
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
- ☐ **Contributions to employee benefit plans**  
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
- ☐ **Certain farmers and fishermen**  
Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
- ☐ **Deposits by individuals**  
Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
- ☐ **Taxes and Certain Other Debts Owed to Governmental Units**  
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
- ☐ **Commitments to Maintain the Capital of an Insured Depository Institution**  
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
- ☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**  
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5467 5/3 Bank Cc 38 Fountain Square Cincinnati, OH 45263		Revolving account opened 1/08				9,673.00
ACCOUNT NO. 5218783010132759 Action Card/utb Pob 105555 Atlanta, GA 30348		Revolving account opened 3/02				1,776.00
ACCOUNT NO. 5584-1800-1432-1429 Advanta PO Box 30715 Salt Lake City, UT 84130-0715		Revolving credit card charges incurred over the past several years.				2,788.00
ACCOUNT NO. 3499909233541553 American Express P.o. Box 981537 El Paso, TX 79998		Revolving account opened 8/02				9,178.00
Subtotal (Total of this page)						\$ 23,415.00
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$

3 continuation sheets attached

IN RE Popov, Dimitar

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Becket And Lee</b> <b>PO Box 3001</b> <b>Malvern, PA 19355-0701</b>		<b>Assignee or other notification for:</b> <b>American Express</b>				
ACCOUNT NO. <b>1428</b> <b>Bank Of America</b> <b>4060 Ogletown/stan</b> <b>Newark, DE 19713</b>		<b>Revolving account opened 3/02</b>				<b>4,479.00</b>
ACCOUNT NO. <b>4117111355577</b> <b>Beneficial/hfc</b> <b>Po Box 1547</b> <b>Chesapeake, VA 23327</b>		<b>Revolving account opened 11/07. Collections</b> <b>acct no 80020.329</b>				<b>19,490.00</b>
ACCOUNT NO. <b>Friedman And Wexler</b> <b>500 W Madison St Ste 2910</b> <b>Chicago, IL 60661-4571</b>		<b>Assignee or other notification for:</b> <b>Beneficial/hfc</b>				
ACCOUNT NO. <b>435787702021</b> <b>Chase</b> <b>800 Brooksedge Blvd</b> <b>Westerville, OH 43081</b>		<b>Revolving account opened 2/05</b>				<b>1,311.00</b>
ACCOUNT NO. <b>511222671</b> <b>Citgo/cbsd</b> <b>Po Box 6497</b> <b>Sioux Falls, SD 57117</b>		<b>Revolving account opened 1/08</b>				<b>646.00</b>
ACCOUNT NO. <b>5467-0024-0928-5625</b> <b>Fifth Third Bank</b> <b>5050 Kingsley Dr</b> <b>Cincinnati, OH 45263</b>		<b>Revolving account opened 1/08</b>				<b>9,673.00</b>

Sheet no. 1 of 3 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **35,599.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$

IN RE Popov, Dimitar

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
**(Continuation Sheet)**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>5178007936771963</b> <b>First Premier Bank</b> <b>601 S Minnesota Ave</b> <b>Sioux Falls, SD 57104</b>		<b>Revolving account opened 6/08</b>				<b>348.00</b>
ACCOUNT NO. <b>706159103899</b> <b>Gemb/chevron</b> <b>4125 Windward Plz</b> <b>Alpharetta, GA 30005</b>		<b>Revolving account opened 10/02</b>				<b>1,032.00</b>
ACCOUNT NO. <b>540801003518</b> <b>Hsbc Bank</b> <b>Po Box 5253</b> <b>Carol Stream, IL 60197</b>		<b>Revolving account opened 12/06</b>				<b>2,816.00</b>
ACCOUNT NO. <b>540801003604</b> <b>Hsbc Bank</b> <b>Po Box 5253</b> <b>Carol Stream, IL 60197</b>		<b>Revolving account opened 11/07.</b>				<b>1,829.00</b>
ACCOUNT NO. <b>700106310747</b> <b>Hsbc/bsbuy</b> <b>Po Box 15519</b> <b>Wilmington, DE 19850</b>		<b>Revolving account opened 1/03</b>				<b>2,673.00</b>
ACCOUNT NO. <b>928317916</b> <b>Shell/citi</b> <b>Po Box 6497</b> <b>Sioux Falls, SD 57117</b>		<b>Revolving account opened 12/01</b>				<b>774.00</b>
ACCOUNT NO. <b>6035320243691688</b> <b>Thd/cbsd</b> <b>Po Box 6497</b> <b>Sioux Falls, SD 57117</b>		<b>Revolving account opened 5/06</b>				<b>906.00</b>

Sheet no. 2 of 3 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) \$ **10,378.00**(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.)  
Total  
\$



IN RE Popov, Dimitar

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>634116568</b> <b>Tnb - Target</b> <b>Po Box 673</b> <b>Minneapolis, MN 55440</b>		<b>Revolving account opened 7/08</b>				<b>497.00</b>
ACCOUNT NO. <b>3293510016</b> <b>Travel Centers Of America</b> <b>24601 Center Ridge Rd Ste 200</b> <b>Westlake, OH 44145-5677</b>		<b>Revolving credit card charges incurred over the past several years.</b>				<b>11,270.00</b>
ACCOUNT NO. <b>0100892852</b> <b>Wash Mutual/providian</b> <b>Po Box 9180</b> <b>Pleasanton, CA 94588</b>		<b>Revolving account opened 11/01</b>				<b>4,742.00</b>
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. **3** of **3** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page) \$ **16,509.00**

Total  
(Use only on last page of the completed Schedule F. Report also on  
the Summary of Schedules, and if applicable, on the Statistical  
Summary of Certain Liabilities and Related Data.) \$ **85,901.00**

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital Status <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): <b>Dependent</b> <b>Dependent</b>	AGE(S): <b>10</b> <b>12</b>
EMPLOYMENT: DEBTOR		SPOUSE
Occupation <b>Self-Employed</b> Name of Employer <b>International Cargo Carriers</b> How long employed <b>2 years</b> Address of Employer		<b>Housekeeping</b> <b>Renaissance Hotel</b> <b>2 years</b>

<b>INCOME:</b> (Estimate of average or projected monthly income at time case filed)	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	\$	\$ <b>407.48</b>
2. Estimated monthly overtime	\$	\$
<b>3. SUBTOTAL</b>	<b>\$ 0.00</b>	<b>\$ 407.48</b>
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and Social Security	\$	\$ <b>48.13</b>
b. Insurance	\$	\$ <b>61.65</b>
c. Union dues	\$	\$
d. Other (specify)	\$	\$
<b>5. SUBTOTAL OF PAYROLL DEDUCTIONS</b>	<b>\$ 0.00</b>	<b>\$ 109.78</b>
<b>6. TOTAL NET MONTHLY TAKE HOME PAY</b>	<b>\$ 0.00</b>	<b>\$ 297.70</b>
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ <b>8,000.00</b>	\$
8. Income from real property	\$	\$
9. Interest and dividends	\$	\$
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$	\$
11. Social Security or other government assistance (Specify)	\$	\$
12. Pension or retirement income	\$	\$
13. Other monthly income (Specify)	\$	\$
<b>14. SUBTOTAL OF LINES 7 THROUGH 13</b>	<b>\$ 8,000.00</b>	\$
<b>15. AVERAGE MONTHLY INCOME</b> (Add amounts shown on lines 6 and 14)	<b>\$ 8,000.00</b>	<b>\$ 297.70</b>
<b>16. COMBINED AVERAGE MONTHLY INCOME:</b> (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	<b>\$ 8,297.70</b>	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**None**

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 1,800.00
a. Are real estate taxes included? Yes No <input checked="" type="checkbox"/>	
b. Is property insurance included? Yes No <input checked="" type="checkbox"/>	
2. Utilities:	
a. Electricity and heating fuel	\$ 100.00
b. Water and sewer	\$
c. Telephone	\$ 50.00
d. Other Cell Phones	\$ 150.00
Cable And Internet	\$ 80.00
3. Home maintenance (repairs and upkeep)	\$ 20.00
4. Food	\$ 500.00
5. Clothing	\$ 100.00
6. Laundry and dry cleaning	\$ 35.00
7. Medical and dental expenses	\$ 75.00
8. Transportation (not including car payments)	\$ 225.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$
10. Charitable contributions	\$
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$
b. Life	\$ 50.00
c. Health	\$
d. Auto	\$ 100.00
e. Other	\$
12. Taxes (not deducted from wages or included in home mortgage payments)	
(Specify)	\$
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ 609.00
b. Other 2nd Mortgage	\$ 200.00
Association Dues	\$ 450.00
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your home	\$
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ 3,500.00
17. Other School Expenses	\$ 75.00
Personal Care And Grooming	\$ 150.00
Bank Fees And Postage	\$ 25.00

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.

\$ 8,294.00

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

None

20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$ 8,297.70
b. Average monthly expenses from Line 18 above	\$ 8,294.00
c. Monthly net income (a. minus b.)	\$ 3.70

IN RE **Popov, Dimitar**

Debtor(s)

Case No. \_\_\_\_\_

(If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 18 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: **February 27, 2009** Signature: **/s/ Dimitar Popov**  
**Dimitar Popov**

Debtor

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

IN RE:

Popov, Dimitar

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7

**BUSINESS INCOME AND EXPENSES**

**FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS** (Note: ONLY INCLUDE information directly related to the business operation.)

**PART A - GROSS BUSINESS INCOME FOR THE PREVIOUS 12 MONTHS:**

1. Gross Income For 12 Months Prior to Filing: \$ \_\_\_\_\_

**PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:**

2. Gross Monthly Income: \$ 8,000.00

**PART C - ESTIMATED FUTURE MONTHLY EXPENSES:**

3. Net Employee Payroll (Other Than Debtor) \$ \_\_\_\_\_  
4. Payroll Taxes \$ \_\_\_\_\_  
5. Unemployment Taxes \$ \_\_\_\_\_  
6. Worker's Compensation \$ \_\_\_\_\_  
7. Other Taxes \$ \_\_\_\_\_  
8. Inventory Purchases (Including raw materials) \$ \_\_\_\_\_  
9. Purchase of Feed/Fertilizer/Seed/Spray \$ \_\_\_\_\_  
10. Rent (Other than debtor's principal residence) \$ \_\_\_\_\_  
11. Utilities \$ \_\_\_\_\_  
12. Office Expenses and Supplies \$ \_\_\_\_\_  
13. Repairs and Maintenance \$ \_\_\_\_\_  
14. Vehicle Expenses \$ 2,500.00  
15. Travel and Entertainment \$ \_\_\_\_\_  
16. Equipment Rental and Leases \$ \_\_\_\_\_  
17. Legal/Accounting/Other Professional Fees \$ \_\_\_\_\_  
18. Insurance \$ 1,000.00  
19. Employee Benefits (e.g., pension, medical, etc.) \$ \_\_\_\_\_  
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts (Specify): \$ \_\_\_\_\_

21. Other (Specify): \$ \_\_\_\_\_

22. Total Monthly Expenses (Add items 3-21) \$ 3,500.00

**PART D - ESTIMATED AVERAGE NET MONTHLY INCOME**

23. **AVERAGE NET MONTHLY INCOME** (Subtract Item 22 from Item 2) \$ 4,500.00

IN RE:

Popov, Dimitar

Case No. \_\_\_\_\_

Chapter 7

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE  
8,000.00 2008 Income from employment (monthly)  
47,249.00 2007 Income from employment  
26,109.00 2006 Income from employment

2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None ☐ a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
------------------------------	-------------------	-------------	--------------------

Chase Auto Finance  
600 Community Dr  
Manhasset, NY 11030-3825

Last 3 months

1,827.00

14,020.00

National City Mortgage  
PO Box 1820  
Dayton, OH 45401-1820

Last 3 months

5,400.00

199,600.00

None ☒ *b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ *c. All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None ☒ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

None ☒ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

#### 10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

#### 11. Closed financial accounts

None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
<b>Fifth Third Bank</b> <b>1850 E Paris Ave SE</b> <b>Grand Rapids, MI 49546-6253</b>	<b>Savings and businss accounts</b>	<b>negative upon closing</b>

#### 12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

#### 15. Prior address of debtor

None ☐ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
<b>905 Center St, #209, Desplaines, IL 60016</b>		
<b>1759 Cochteau St, #14, Simi Valley, CA 93065</b>		<b>through April 2006</b>

#### 16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.



- None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.
- None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.
- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

#### 18. Nature, location and name of business

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

	LAST FOUR DIGITS OF SOCIAL- SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
NAME				
International Cargo Carriers Inc		905 Center St Unit 209 Des Plaines, IL 60016	Truck leasing	2006 - 2008

- None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

- None ☒ a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.
- None ☒ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.
- None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.
- None ☒ d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the **two years** immediately preceding the commencement of the case by the debtor.

**20. Inventories**

None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None ☒ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

**21. Current Partners, Officers, Directors and Shareholders**

None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None ☒ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

**22. Former partners, officers, directors and shareholders**

None ☒ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

None ☒ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

**23. Withdrawals from a partnership or distributions by a corporation**

None ☒ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

**24. Tax Consolidation Group**

None ☒ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

**25. Pension Funds.**

None ☒ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **February 27, 2009** Signature /s/ Dimitar Popov  
of Debtor **Dimitar Popov**

Date: \_\_\_\_\_ Signature \_\_\_\_\_  
of Joint Debtor  
(if any)

\_\_\_\_\_ **0** continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

**IN RE:**

Case No. \_\_\_\_\_

**Popov, Dimitar**

Chapter **7**

Debtor(s)

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 250,000.00		
B - Personal Property	Yes	3	\$ 152,275.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		\$ 416,259.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$ 85,901.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 8,297.70
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 8,294.00
TOTAL		16	\$ 402,275.00	\$ 502,160.00	

**Document Page 28 of 55**  
**United States Bankruptcy Court**  
**Northern District of Illinois**

**IN RE:**

Case No. \_\_\_\_\_

**Popov, Dimitar**Chapter **7**

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

<b>Type of Liability</b>	<b>Amount</b>
Domestic Support Obligations (from Schedule E)	\$ <b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ <b>0.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ <b>0.00</b>
Student Loan Obligations (from Schedule F)	\$ <b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ <b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ <b>0.00</b>
<b>TOTAL</b>	\$ <b>0.00</b>

**State the following:**

Average Income (from Schedule I, Line 16)	\$ <b>8,297.70</b>
Average Expenses (from Schedule J, Line 18)	\$ <b>8,294.00</b>
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$ <b>5,265.75</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ <b>19,464.00</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ <b>0.00</b>	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ <b>0.00</b>
4. Total from Schedule F		\$ <b>85,901.00</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ <b>105,365.00</b>

IN RE:

Popov, Dimitar

Case No. \_\_\_\_\_

Chapter 7

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE  
WITH CREDIT COUNSELING REQUIREMENT**

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- ☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Dimitar Popov

Date: February 27, 2009

IN RE:

Popov, Dimitar

Case No. \_\_\_\_\_

Chapter **7**

Debtor(s)

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** – Debts secured by property of the estate. (Part A must be fully completed for *EACH* debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
<b>Creditor's Name:</b> Chase Auto	<b>Describe Property Securing Debt:</b> 2008 Subaru Tribeca
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	
Property No. 2 (if necessary)	
<b>Creditor's Name:</b> Fifth Third Bank	<b>Describe Property Securing Debt:</b> 08 Volvo 670 Semi-Truck
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

**PART B** – Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No. 2 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

2 continuation sheets attached (if any)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: **February 27, 2009**

**/s/ Dimitar Popov**

Signature of Debtor

\_\_\_\_\_  
Signature of Joint Debtor

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**  
(Continuation Sheet)

**PART A – Continuation**

Property No. 3		
<b>Creditor's Name:</b> Fifth Third Bank		<b>Describe Property Securing Debt:</b> 2000 Volo 610 Semi-truck
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt		
Property No. 4		
<b>Creditor's Name:</b> Fifth Third Bank		<b>Describe Property Securing Debt:</b> 2001 Freightliner Class Century Semi Truck
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt		
Property No. 5		
<b>Creditor's Name:</b> National City Mortgage		<b>Describe Property Securing Debt:</b> Residence at:
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt		

**PART B – Continuation**

Property No.		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No.		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**  
(Continuation Sheet)

**PART A – Continuation**

Property No. 6		
<b>Creditor's Name:</b> Natl Cty Crd		<b>Describe Property Securing Debt:</b> Residence at:
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt		
Property No. 7		
<b>Creditor's Name:</b> Toyota Financial Services		<b>Describe Property Securing Debt:</b> 08 Volvo 670 Semi-Truck
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt		
Property No.		
<b>Creditor's Name:</b>		<b>Describe Property Securing Debt:</b>
Property will be (check one): <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt		

**PART B – Continuation**

Property No.		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No.		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No



IN RE:

Case No. \_\_\_\_\_

Popov, Dimitar

Chapter 7

Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors 26

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: February 27, 2009

/s/ Dimitar Popov

Debtor

\_\_\_\_\_  
Joint Debtor

Popov, Dimitar  
905 Center St, #209  
Des Plaines, IL 60016

Chase Auto  
600 Community Drive  
Manhasset, NY 11030

National City Mortgage  
Po Box 1820  
Dayton, OH 45401

Gleason & Gleason  
77 W Washington, Ste 1218  
Chicago, IL 60602

Citgo/cbsd  
Po Box 6497  
Sioux Falls, SD 57117

Natl Cty Crd  
4661 E Main St  
Columbus, OH 43213

5/3 Bank Cc  
38 Fountain Square  
Cincinnati, OH 45263

Fifth Third Bank  
5050 Kingsley Dr  
Cincinnati, OH 45263

Shell/citi  
Po Box 6497  
Sioux Falls, SD 57117

Action Card/utb  
Pob 105555  
Atlanta, GA 30348

Fifth Third Bank  
Po Box 630337  
Cincinnati, OH 45263

Thd/cbsd  
Po Box 6497  
Sioux Falls, SD 57117

Advanta  
PO Box 30715  
Salt Lake City, UT 84130-0715

Fifth Third Bank  
346 W North Ave  
Elmhurst, IL 60126

Tnb - Target  
Po Box 673  
Minneapolis, MN 55440

American Express  
P.o. Box 981537  
El Paso, TX 79998

First Premier Bank  
601 S Minnesota Ave  
Sioux Falls, SD 57104

Toyota Financial Services  
Commerical Finance  
Dept 2431  
Carol Stream, IL 60132-2431

Bank Of America  
4060 Ogletown/stan  
Newark, DE 19713

Friedman And Wexler  
500 W Madison St Ste 2910  
Chicago, IL 60661-4571

Travel Centers Of America  
24601 Center Ridge Rd Ste 200  
Westlake, OH 44145-5677

Becket And Lee  
PO Box 3001  
Malvern, PA 19355-0701

Gemb/chevron  
4125 Windward Plz  
Alpharetta, GA 30005

Wash Mutual/providian  
Po Box 9180  
Pleasanton, CA 94588

Beneficial/hfc  
Po Box 1547  
Chesapeake, VA 23327

Hsbc Bank  
Po Box 5253  
Carol Stream, IL 60197

Chase  
800 Brooksedge Blvd  
Westerville, OH 43081

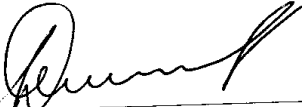
Hsbc/bsbuy  
Po Box 15519  
Wilmington, DE 19850

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION

In Re: ) Case No.  
Dimitar Popov )  
 )  
 ) Chapter ~~11~~ 7  
Debtor(s). ) Judge  
 )

**DECLARATION CONCERNING INCOME**

1. I own my own business, International Cargo Carriers, Inc. I earn approximately \$ 8000 per month from the business. I do not pay myself a pay check stub.
2. Thus, I do not have pay advises/ check stubs for the 60 days prior to the filing of the case or proof of income for the six months prior to filing.
3. Additional Comments:

  
\_\_\_\_\_  
Debtor's Signature

Date: 12/19/08

\_\_\_\_\_  
Joint Debtor's Signature

Date: \_\_\_\_\_

Personal 2007

2007

# Income Tax Return

**Prepared For:**

DIMITAR POPOV and MARIYA POPOVA  
905 CENTER STR Apt. 209  
DES PLAINES, IL 60016

**Prepared By:**

Svetla P Koleva  
4830 N. Cumberland Ave  
Norridge, IL 60706  
Telephone: (708) 452-4377 or (312) 671-1333  
FAX: (708) 452-4397  
Email: svetlakoleva@yahoo.com

<b>Form 1040</b> Department of the Treasury - Internal Revenue Service <b>U.S. Individual Income Tax Return 2007</b>		IRS Use Only. Do not write or staple in this space.																								
Form for year Jan. 1-Dec. 31, 2007, or other tax year beginning 2007 and ending 20		OMB No. 1545-0074																								
<b>Label</b> (See instructions)  <b>Use the IRS label.</b> Otherwise, please print or type.	Your first name and initial <b>DIMITAR</b> Last name <b>POPOV</b> If a joint return, spouse's first name and initial <b>MARIYA</b> Last name <b>POPOVA</b> Home address (number and street); if you have a P.O. box, see instructions. <b>905 CENTER STR</b> Apt. no. <b>209</b> City, town or post office, state, and ZIP code. If you have a foreign address, see instructions. <b>DES PLAINES, IL 60016</b>	Your social security number <b>637-70-0628</b> Spouse's social security number <b>623-33-2836</b> You must enter your SSN(s) above.																								
	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see instructions).																									
	Filing Status Check only one box. 1 <input type="checkbox"/> Single 2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income) 3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. 4 <input type="checkbox"/> Head of household (with qualifying person). (See instructions). If the qualifying person is a child but not your dependent, enter this child's name here. 5 <input type="checkbox"/> Qualifying widow(er) with dependent child. (See instructions).																									
	Exemptions 6a <input checked="" type="checkbox"/> Yourself. If someone can claim you as a dependent, do not check box 6a. b <input checked="" type="checkbox"/> Spouse. c Dependents: <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th>(1) First name</th> <th>Last name</th> <th>(2) Dependent's social security number</th> <th>(3) Dependent's relationship to you</th> <th>(4) <input checked="" type="checkbox"/> If qualifying child for child tax credit</th> </tr> </thead> <tbody> <tr> <td>NICOL</td> <td>POPOVA</td> <td>344-02-2242</td> <td>Daughter</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>DIMITAR</td> <td>POPOV</td> <td>344-02-0976</td> <td>Son</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>LYUBKA</td> <td>GEORGIEVA</td> <td></td> <td>Parent</td> <td><input type="checkbox"/></td> </tr> <tr> <td>TEODORA</td> <td>POPOVA</td> <td></td> <td>Parent</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>		(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If qualifying child for child tax credit	NICOL	POPOVA	344-02-2242	Daughter	<input checked="" type="checkbox"/>	DIMITAR	POPOV	344-02-0976	Son	<input checked="" type="checkbox"/>	LYUBKA	GEORGIEVA		Parent	<input type="checkbox"/>	TEODORA	POPOVA		Parent
(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If qualifying child for child tax credit																						
NICOL	POPOVA	344-02-2242	Daughter	<input checked="" type="checkbox"/>																						
DIMITAR	POPOV	344-02-0976	Son	<input checked="" type="checkbox"/>																						
LYUBKA	GEORGIEVA		Parent	<input type="checkbox"/>																						
TEODORA	POPOVA		Parent	<input type="checkbox"/>																						
d Total number of exemptions claimed		Boxes checked on 6a and 6b: 2 No. of children on 6c who: • lived with you: 2 • did not live with you due to divorce or separation (see instructions): 0 Dependents on 6c not entered above: 2 Add numbers on lines above: 6																								
Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a W-2, see instructions.		7 Wages, salaries, tips, etc. Attach Form(s) W-2: 22,511. 8a Taxable interest. Attach Schedule B if required. b Tax-exempt interest. Do not include on line 8a. 9a Ordinary dividends. Attach Schedule B if required. b Qualified dividends (see instructions). 10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions). 11 Alimony received. 12 Business income or (loss). Attach Schedule C or C-EZ: 1,328. 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here. 14 Other gains or (losses). Attach Form 4797. 15a IRA distributions: 15a b Taxable amount (see instructions): 15b 16a Pensions and annuities: 16a b Taxable amount (see instructions): 16b 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E: 47,249. 18 Farm income or (loss). Attach Schedule F. 19 Unemployment compensation. 20a Social security benefits: 20a b Taxable amount (see instructions): 20b 21 Other income. List type and amount (see instructions). 22 Add the amounts in the far right column for lines 7 through 21. This is your total income: 71,088.																								
Adjusted Gross Income 23 Educator expenses (see instructions). 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ. 25 Health savings account deduction. Attach Form 8889. 26 Moving expenses. Attach Form 3903. 27 One-half of self-employment tax. Attach Schedule SE: 94. 28 Self-employed SEP, SIMPLE, and qualified plans. 29 Self-employed health insurance deduction (see instructions). 30 Penalty on early withdrawal of savings. 31a Alimony paid b Recipient's SSN 32 IRA deduction (see instructions). 33 Student loan interest deduction (see instructions). 34 Tuition and fees deduction. Attach Form 8817. 35 Domestic production activities deduction. Attach Form 3903. 36 Add lines 23 through 31a and 32 through 35: 94. 37 Subtract line 36 from line 22. This is your adjusted gross income: 70,994.																										

<b>Tax and Credits</b>	38	Amount from line 37 (adjusted gross income)	38	70,994.
	39a	Check <input type="checkbox"/> You were born before January 2, 1943. <input type="checkbox"/> Blind. Total boxes checked <b>39a</b> 0 if: <input type="checkbox"/> Spouse was born before January 2, 1943. <input type="checkbox"/> Blind.		
<b>Standard Deduction for -</b>	b	If your spouse itemized on a separate return or you were a dual-status alien, see instructions and check here <b>39b</b> <input type="checkbox"/>		
• People who checked any box on line 39a or 39b or who can be claimed as a dependent. See instr.	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	26,307.
• All others:	41	Subtract line 40 from line 38	41	44,687.
Single or Married filing separately, \$5,350	42	If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on line 6d. If line 38 is over \$117,300, see the worksheet in instructions	42	20,400.
Married filing jointly or Qualifying widower, \$10,700	43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	24,287.
Head of household, \$7,350	44	Tax (see instructions). Check if any tax is from: a <input type="checkbox"/> Form(s) 3814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> Form(s) 3899	44	2,859.
	45	Alternative minimum tax (see instructions). Attach Form 6251	45	
	46	Add lines 44 and 45	46	2,859.
	47	Credit for child and dependent care expenses. Attach Form 2441	47	
	48	Credit for the elderly or the disabled. Attach Schedule R	48	
	49	Education credits. Attach Form 8863	49	249.
	50	Residential energy credits. Attach Form 5695	50	
	51	Foreign tax credit. Attach Form 1116 if required	51	
	52	Child tax credit (see instructions). Attach Form 8901 if required	52	2,000.
	53	Retirement savings contributions credit. Attach Form 8880	53	
	54	Credits from: a <input type="checkbox"/> Form 8996 b <input type="checkbox"/> Form 8859 c <input type="checkbox"/> Form 8839	54	
	55	Other credits: a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 3801 c <input type="checkbox"/> Form	55	
	56	Add lines 47 through 55. These are your total credits	56	2,249.
	57	Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-	57	610.
<b>Other Taxes</b>	58	Self-employment tax. Attach Schedule SE	58	188.
	59	Unreported social security and Medicare tax from: a <input type="checkbox"/> Form 4137 b <input type="checkbox"/> Form 8919	59	
	60	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	60	
	61	Advance earned income credit payments from Form(s) W-2, box 9	61	
	62	Household employment taxes. Attach Schedule H	62	
	63	Add lines 57 through 62. This is your total tax	63	798.
<b>Payments</b>	64	Federal income tax withheld from Forms W-2 and 1099	64	774.
	65	2007 estimated tax payments and amount applied from 2006 return	65	
	66a	Earned income credit (EIC)	66a	
	b	Nontaxable combat pay election <b>66b</b>		
	67	Excess social security and tier 1 RRTA tax withheld (see instr.)	67	
	68	Additional child tax credit. Attach Form 8812	68	
	69	Amount paid with request for extension to file (see instructions)	69	
	70	Payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 1136 c <input type="checkbox"/> Form 3355	70	
	71	Refundable credit for prior year minimum tax from Form 8801 line 27	71	
	72	Add lines 64, 65, 66a, and 67 through 71. These are your total payments	72	774.
<b>Refund</b>	73	If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid	73	0.
Direct deposit? See instructions and fill in 74b, 74c, and 74d, or Form 8888.	74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	74a	0.
	b	Routing number		
	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number		
	75	Amount of line 73 you want applied to your 2008 estimated tax <b>75</b>		
<b>Amount You Owe</b>	76	Amount you owe. Subtract line 72 from line 63. For details on how to pay, see instructions	76	24.
	77	Estimated tax penalty (see instructions)	77	

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete the following. ☐ No

<b>Sign Here</b>	Designee's name <b>PREPARER</b>	Phone no.	Personal identification number (PIN)
Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, this return and accompanying schedules and statements are true and correct. Declaration of preparer (other than accountant) is based on all information furnished by preparer and taxpayer.			
Joint return? See instructions. Keep a copy for your records	Your signature	Date	Your occupation <b>DRIVER</b>
	Spouse's signature, if a joint return, both must sign.	Date	Spouse's occupation <b>LABOR</b>

<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN <b>P00759592</b>
	Firm's name (or yours if self-employed), address, and ZIP code	EIN	Phone no.	
	<b>Svetla P Koleva</b>			
	<b>4830 N. Cumberland Ave</b>			
	<b>Norridge IL 60706</b>			<b>708-452-4377</b>

**SCHEDULES A&B**  
**(Form 1040)**

**Schedule A - Itemized Deductions**

(Schedule B is on page 2)

OMB No. 1545-0074

**2007**

Attachment  
Sequence No. **07**

Department of the Treasury,  
Internal Revenue Service

▶ **Attach to Form 1040.** ▶ **See instructions for Schedules A&B (Form 1040).**

Name(s) shown on Form 1040

Your social security number

**DIMITAR POPOV and MARIYA POPOVA**

**637-70-0628**

<b>Medical and Dental Expenses</b>		<b>Caution.</b> Do not include expenses reimbursed or paid by others.			
1	Medical and dental expenses (see instructions)	1			
2	Enter amount from Form 1040, line 38 <b>2</b>	2			
3	Multiply line 2 by 7.5% (.075)	3			
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4			<b>0.</b>
<b>Taxes You Paid</b>		<b>State and local (check only one box):</b>			
(See instructions.)		a <input checked="" type="checkbox"/> Income taxes, or	5	<b>575.</b>	
		b <input type="checkbox"/> General sales taxes			
6	Real estate taxes (see instructions)	6	<b>3,558.</b>		
7	Personal property taxes	7			
8	Other taxes. List type and amount ▶	8			
9	Add lines 5 through 8	9			<b>4,133.</b>
<b>Interest You Paid</b>		<b>Home mortgage interest and points reported to you on Form 1098</b>			
(See instructions.)		10	<b>21,674.</b>		
		11			
Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ▶		11			
<b>Note.</b> Personal interest is not deductible		12			
Points not reported to you on Form 1098. See instructions for special rules		12			
Qualified mortgage insurance premiums (see instructions)		13			
Investment interest. Attach Form 4952 if required. (See instructions.)		14			
15	Add lines 10 through 14	15			<b>21,674.</b>
<b>Gifts to Charity</b>		<b>Gifts by cash or check. If you made any gift of \$250 or more, see instructions.</b>			
(if you made a gift and got a benefit for it, see instructions.)		16	<b>500.</b>		
		17			
Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500.		17			
Carryover from prior year		18			
19	Add lines 16 through 18	19			<b>500.</b>
<b>Casualty and Theft Losses</b>		<b>Casualty or theft loss(es). Attach Form 4684. (See instructions.)</b>			
20		20			<b>0.</b>
<b>Job Expenses and Certain Miscellaneous Deductions</b>		<b>Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶</b>			
(See instructions.)		21			
		22			
Tax preparation fees		22			
Other expenses - investment, safe deposit box, etc. List type and amount ▶		23			
Add lines 21 through 23		24			
25	Enter amount from Form 1040, line 38 <b>25</b>	25			
26	Multiply line 25 by 2% (.02)	26			
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27			<b>0.</b>
<b>Other Miscellaneous Deductions</b>		<b>Other - from list in the instr. List type and amount ▶</b>			
28		28			<b>0.</b>
<b>Total Itemized Deductions</b>		<b>Is Form 1040, line 38, over \$156,400 (or over \$78,200 if married filing separately)?</b>			
		<input checked="" type="checkbox"/> <b>No.</b> Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40.		} ▶	<b>26,307.</b>
		<input type="checkbox"/> <b>Yes.</b> Your deduction may be limited. See instructions for the amount to enter.			
30	if you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>	30			

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 1040) 2007

UVA

**SCHEDULE C  
(Form 1040)**

**Profit or Loss From Business**  
(Sole Proprietorship)

OMB No. 1545-0047

**2007**

Attachment  
Sequence No. **09**

Department of the Treasury  
Internal Revenue Service

Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.  
Attach to Form 1040, 1040NR or 1041. See Instructions for Schedule C (Form 1040).

Name of proprietor

**DIMITAR POPOV**

Social security number (SSN)

**637-70-0628**

**A** Principal business or profession, including product or service (see the instructions)

**TRUCK OPERATOR**

**B** Enter code from instructions

**484120**

**C** Business name. If no separate business name, leave blank.

**D** Employer ID number (EIN), if any

**E** Business address (including suite or room no.)

City, town or post office, state, and ZIP code

**F** Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify)

**G** Did you "materially participate" in the operation of this business during 2007? If "No," see instructions for limit on losses ☒ Yes ☐ No

**H** If you started or acquired this business during 2007, check here

**Part I Income**

<b>1</b> Gross receipts or sales. <b>Caution.</b> If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see instructions and check here <input type="checkbox"/>	<b>1</b>	<b>2,066.</b>
<b>2</b> Returns and allowances	<b>2</b>	
<b>3</b> Subtract line 2 from line 1	<b>3</b>	<b>2,066.</b>
<b>4</b> Cost of goods sold (from line 42 on page 2)	<b>4</b>	
<b>5</b> <b>Gross profit.</b> Subtract line 4 from line 3	<b>5</b>	<b>2,066.</b>
<b>6</b> Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	<b>6</b>	
<b>7</b> <b>Gross income.</b> Add lines 5 and 6	<b>7</b>	<b>2,066.</b>

**Part II Expenses.** Enter expenses for business use of your home **only** on line 30.

<b>8</b> Advertising	<b>8</b>		<b>18</b> Office expense	<b>18</b>	
<b>9</b> Car and truck expenses (see instructions)	<b>9</b>		<b>19</b> Pension and profit-sharing plans	<b>19</b>	
<b>10</b> Commissions and fees	<b>10</b>		<b>20</b> Rent or lease (see instructions):		
<b>11</b> Contract labor (see instructions)	<b>11</b>		<b>a</b> Vehicles, machinery, and equipment	<b>20a</b>	
<b>12</b> Depletion	<b>12</b>		<b>b</b> Other business property	<b>20b</b>	
<b>13</b> Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	<b>13</b>		<b>21</b> Repairs and maintenance	<b>21</b>	
<b>14</b> Employee benefit programs (other than on line 19)	<b>14</b>		<b>22</b> Supplies (not included in Part III)	<b>22</b>	
<b>15</b> Insurance (other than health)	<b>15</b>		<b>23</b> Taxes and licenses	<b>23</b>	
<b>16</b> Interest:			<b>24</b> Travel, meals, and entertainment:		
<b>a</b> Mortgage (paid to banks, etc.)	<b>16a</b>		<b>a</b> Travel	<b>24a</b>	
<b>b</b> Other	<b>16b</b>		<b>b</b> Deductible meals and entertainment (see instructions)	<b>24b</b>	<b>738.</b>
<b>17</b> Legal and professional services	<b>17</b>		<b>25</b> Utilities	<b>25</b>	
			<b>26</b> Wages (less employment credits)	<b>26</b>	
			<b>27</b> Other expenses (from line 48 on page 2)	<b>27</b>	
<b>28</b> <b>Total expenses</b> before expenses for business use of home. Add lines 8 through 27 in columns	<b>28</b>	<b>738.</b>			
<b>29</b> Tentative profit (loss). Subtract line 28 from line 7	<b>29</b>	<b>1,328.</b>			
<b>30</b> Expenses for business use of your home. Attach <b>Form 8829</b>	<b>30</b>				
<b>31</b> <b>Net profit or (loss).</b> Subtract line 30 from line 29.					
• If a profit, enter on <b>Form 1040, line 12</b> , and <b>Schedule SE, line 2</b> or on <b>Form 1040NR, line 13</b> (statutory employees, see instructions). Estates and trusts, enter on <b>Form 1041, line 3</b> .					
• If a loss, you <b>must</b> go to line 32.					
<b>32</b> If you have a loss, check the box that describes your investment in this activity (see instructions).					
• If you checked 32a, enter the loss on both <b>Form 1040, line 12</b> , and <b>Schedule SE, line 2</b> or on <b>Form 1040NR, line 13</b> (statutory employees, see instructions). Estates and trusts, enter on <b>Form 1041, line 3</b> .					
• If you checked 32b, you <b>must</b> attach <b>Form 6198</b> . Your loss may be limited.					
	<b>31</b>	<b>1,328.</b>			

**32a** ☐ All investment is at risk.

**32b** ☐ Some investment is not at risk.

For Paperwork Reduction Act Notice, see instructions.

Schedule C (Form 1040) 2007

UYA



Schedule E (Form 1040) 2007

Attachment Sequence No. 13

Page 2

Names shown on return. Do not enter name and social security number if shown on other side.

**DIMITAR POPOV and MARIYA POPOVA**

Your social security number

**637-70-0628****Caution.** The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.**Part II Income or Loss From Partnerships and S Corporations** **Note.** If you report a loss from an at-risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See instructions.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☐ Yes ☒ No

If you answered "Yes," see instructions before completing this section.

28	(a) Name	(b) Enter P for partnership, S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	INTERNATIONAL CARGO CARRIERS	S	<input type="checkbox"/>	20-5935758	<input type="checkbox"/>
B	Depreciation	S	<input type="checkbox"/>	20-5935758	<input type="checkbox"/>
C			<input type="checkbox"/>		<input type="checkbox"/>
D			<input type="checkbox"/>		<input type="checkbox"/>

Passive Income and Loss		Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A				59,249.
B			12,000.	
C				
D				
29a Totals	0.			59,249.
b Totals	0.	0.	12,000.	
30 Add columns (g) and (j) of line 29a			30	59,249.
31 Add columns (f), (h), and (i) of line 29b			31	12,000.
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below			32	47,249.

**Part III Income or Loss From Estates and Trusts**

33	(a) Name	(b) Employer identification number
A		
B		
Passive Income and Loss		Nonpassive Income and Loss
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1
A		
B		
34a Totals	0.	0.
b Totals	0.	0.
35 Add columns (d) and (f) of line 34a		35 0.
36 Add columns (c) and (e) of line 34b		36 0.
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below		37 0.

**Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder**

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39 0.

**Part V Summary**

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40 0.
41	Total income or (loss). Combine lines 32, 37, 39, and 40. Enter the result here and on Form 1040, line 13, or Form 1040NR, line 13	41 47,249.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code T; and Schedule K-1 (Form 1041), line 14, code F (see instructions)	42 0.
43	Reconciliation for real estate professionals. If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43 0.

UYA

Schedule E (Form 1040) 2007

**SCHEDULE SE**  
**(Form 1040)**

Department of the Treasury,  
Internal Revenue Service 69

**Self-Employment Tax**

▶ **Attach to Form 1040.** ▶ **See instructions for Schedule SE (Form 1040).**

OMB No. 1545-0047

**2007**

Attachment  
Sequence No. **17**

Name of person with self-employment income (as shown on Form 1040)

**DMITAR POPOV**

Social security number of person  
with self-employment income ▶

**637-70-0628**

**Who Must File Schedule SE**

You must file Schedule SE if:

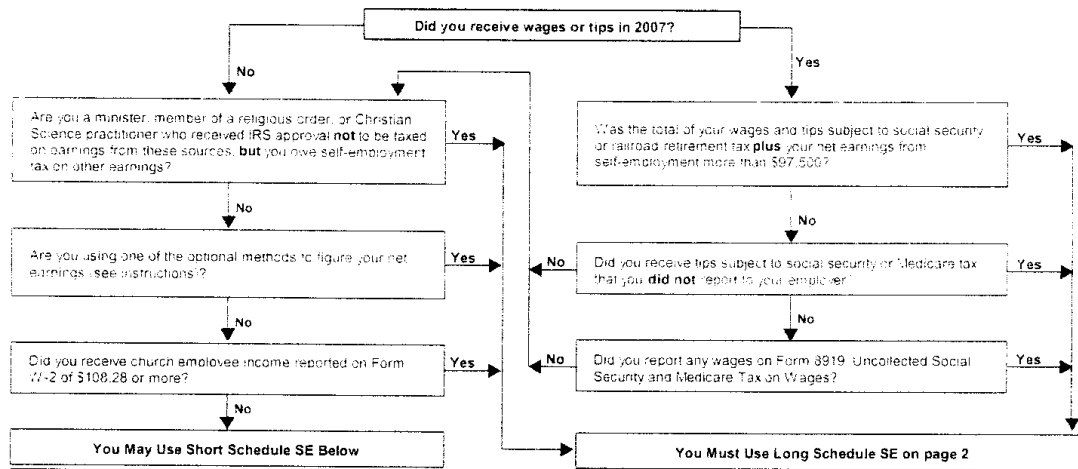
- You had net earnings from self-employment from **other than** church employee income (line 4 of Short Schedule SE or line 4c of Long Schedule SE) of \$400 or more, **or**
- You had church employee income of \$108.28 or more. Income from services you performed as a minister or a member of a religious order **is not** church employee income (see instructions).

**Note.** Even if you had a loss or a small amount of income from self-employment, it may be to your benefit to file Schedule SE and use either "optional method" in Part II of Long Schedule SE (see instructions).

**Exception.** If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner **and** you filed Form 4361 and received IRS approval not to be taxed on those earnings, **do not** file Schedule SE. Instead, write "Exempt-Form 4361" on Form 1040, line 58.

**May I Use Short Schedule SE or Must I Use Long Schedule SE?**

**Note.** Use this flowchart **only** if you must file Schedule SE. If unsure, see Who Must File Schedule SE, above.



**Section A - Short Schedule SE. Caution.** Read above to see if you can use Short Schedule SE.

1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for amounts to report on this line. See instructions for other income to report	2	1,328.
3	Combine lines 1 and 2	3	1,328.
4	<b>Net earnings from self-employment.</b> Multiply line 3 by 92.35% (.9235). If less than \$400, <b>do not</b> file this schedule; you do not owe self-employment tax ▶	4	1,226.
5	<b>Self-employment tax.</b> If the amount on line 4 is: • \$97,500 or less, multiply line 4 by 15.3% (.153). Enter the result here and on <b>Form 1040, line 58.</b> • More than \$97,500, multiply line 4 by 2.9% (.029). Then, add \$12.090 to the result. Enter the total here and on <b>Form 1040, line 58</b>	5	188.
6	<b>Deduction for one-half of self-employment tax.</b> Multiply line 5 by 50% (.5). Enter the result here and on <b>Form 1040, line 27</b>	6	94.

8863 200

Form <b>4562</b> Department of the Treasury Internal Revenue Service	<b>Depreciation and Amortization</b> <b>(Including Information on Listed Property)</b> ▶ See separate instructions. ▶ Attach to your tax return.	CLUB No. 1645-0172 <b>2007</b> Attachment Sequence No. <b>67</b>
Name(s) shown on return <b>DIMITAR POPOV</b>		Identifying number <b>637-70-0628</b>
Business or activity to which this form relates <b>INTERNATIONAL CARGO CARRIERS</b>		

**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	125,000.
2 Total cost of section 179 property placed in service (see instructions)	2	12,000.
3 Threshold cost of section 179 property before reduction in limitation	3	500,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.	5	125,000.

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6 Sch. K-1	12,000.	12,000.

7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	12,000.
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	12,000.
10 Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	83,088.
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11.	12	12,000.
13 Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12. ▶	13	

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**

<b>Section A</b>	
17 MACRS deductions for assets placed in service in tax years beginning before 2007	17
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>	

**Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System**

20a Class life				S/L	
b 12-year		12 yrs.		S/L	
c 40-year		40 yrs.	MM	S/L	

**Part IV Summary (see instructions)**

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	12,000.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.  
 UYA

Form **4562** (2007)

Illinois Department of Revenue  
IL-1040-V Payment Voucher for Individual Income Tax  
ID: 3088

**2007**

637-70-0628

623-33-2836

Your payment is due April 15, 2008.

DIMITAR POPOV and MARIYA POPOVA  
905 CENTER STR Apt. 209  
DES PLAINES, IL 60016

\$ 1,021.00  
Print your payment amount.

Mail to: Illinois Department of Revenue  
Springfield II 62726-0001

Preparer's phone number (708) 452-4377

Write your Social Security number on your check.

104081207 4 2 637700628 0 16151615 7 000102100

Illinois Department of Revenue  
2007 Form IL-1040

tax.Illinois.gov

Individual Income Tax Return

or for fiscal year ending 08

Do not write above this line.

Step 1: Personal Information

A Your Social Security numbers in the order they appear on your federal return

637-70-0628

Your Social Security number

623-33-2836

Your spouse's Social Security number

B Place your label or print your personal information below

DMITAR

POPOV

Your first name and initial

Your last name

MARIYA

POPOVA

Your spouse's first name and initial

Your spouse's last name (if different)

905 CENTER STR Apt. 209

Mailing address

DES PLAINES

IL

60016

City

State

ZIP

C Filing status (see instructions)

☐ Single or head of household

☒ Married filing jointly

☐ Married filing separately

☐ Widowed

Step 2: Income

1 Federal adjusted gross income from your U.S. 1040, Line 37; U.S. 1040A, Line 21; or U.S. 1040EZ, Line 4

1 70,994.

2 Federally tax-exempt interest and dividend income from your U.S. 1040 or 1040A, Line 8b; or U.S. 1040EZ

2

3 Other additions to your income. Attach Schedule M.

3

4 Add Lines 1 through 3. This is your total income.

4 70,994.

Step 3: Base Income

5 Income received from Social Security benefits and certain retirement plans if included in Step 2, Line 1. Attach federal page 1.

5

6 Military pay earned if included in Step 2, Line 1. Attach military W-2.

6

7 Illinois Income Tax overpayment included in U.S. 1040, Line 10

7

8 U.S. Treasury bonds, bills, notes, savings bonds, and U.S. agency interest from U.S. 1040, Schedule B, or U.S. 1040A, Schedule 1

8

9 Other subtractions to your income. Attach Schedule M.

9

Check if Line 9 includes any amount from Schedule 1299-C ☐

10 Add Lines 5 through 9. This is the total of your subtractions.

10

11 Subtract Line 10 from Line 4. This is your Illinois base income.

11 70,994.

Step 4: Exemptions

12 a Number of exemptions from your federal return

6 x \$2,000 a 12,000.

b If someone else claimed or could have claimed you or your spouse as a dependent on their return, see instructions to figure the number to write here.

0 x \$2,000 b

c Check if 65 or older: ☐ You + ☐ Spouse =

0 x \$1,000 c

d Check if legally blind: ☐ You + ☐ Spouse =

0 x \$1,000 d

Add Lines a through d. This is your total Illinois exemption allowance.

12 12,000.

Step 5: Net Income

13 Residents only: Subtract Line 12 from Line 11. This is your net income. Skip Line 14.

13 58,994.

14 Nonresidents and part-year residents only:

Check the box that applies to you during the year 2007: ☐ Nonresident ☐ Part-year resident, and

write the Illinois base income from Schedule NR. Attach Schedule NR.

14 0.

Step 6: Tax

15 Residents: Multiply Line 13 by 3% (.03). Write the result here. This is your tax.

15 1,770.

Nonresidents and part-year residents: Write the tax from Schedule NR.

This amount may not be less than zero.

This form is authorized as outlined by the Illinois Income Tax Act. Disclosure of this information is REQUIRED. Failure to provide information could result in a penalty. This form has been approved by the Forms Management Center, IL-152-2008

16 Tax amount from Page 1, Step 6, Line 15		16	1,770.		
<b>Step 7: Payments and Credits</b>					
17 Illinois Income Tax withheld. <b>Attach</b> W-2 and 1099 forms.		17	575.		
18 Estimated payments from Forms IL-505-I and IL-1040-ES, including overpayment applied from Line 31 of your 2006 return		18			
Nonresidents may not claim a credit on Lines 19, 20, or 21. The total of Lines 19, 20b, and 21b may not exceed the tax amount on Line 16.	19 Income tax paid to another state while an Illinois resident. <b>Attach</b> Schedule CR and other states' returns.	19			
	20 Illinois Property Tax credit. <b>Complete PT Worksheet in instructions.</b>				
	PT Worksheet Line 3 amount	20a	3,558.		
	PT Worksheet Line 8 amount	20b	178.		
21 K-12 Education expense credit. <b>Complete ED Worksheet in instructions</b> or <b>Schedule ED. Attach</b> receipt or Schedule ED.					
ED Worksheet or Schedule ED Line 1 amount		21a			
ED Worksheet or Schedule ED Line 10 amount		21b			
22 Earned Income Credit. <b>Complete EIC Worksheet in instructions.</b>					
EIC Worksheet Line 1 amount		22a			
EIC Worksheet Line 4 amount		22b			
23 Income tax credit amount from Schedule 1299-C. <b>Attach</b> Schedule 1299-C.		23			
24 Add Lines 17, 18, 19, 20b, 21b, 22b, and 23. This is the total of your payments and credits.		24	753.		
<b>Step 8: Overpayment or Tax Due</b>					
25 If Line 24 is greater than Line 16, subtract Line 16 from Line 24. This is your <b>overpayment</b> .		25	0.		
26 If Line 16 is greater than Line 24, subtract Line 24 from Line 16. This is your <b>tax due</b> .		26	1,017.		
<b>Step 9: Penalty</b>					
27 Late-payment penalty for underpayment of estimated tax		27	4.		
a Check if you annualized your income on Form IL-2210, Step 6, or if you are 65 or older and permanently living in a nursing home. <b>Attach</b> Form IL-2210.			<input type="checkbox"/>		
b Check if at least two-thirds of your federal gross income is from farming.			<input type="checkbox"/>		
<b>Step 10: Donations Any donation will reduce your refund or increase the amount you owe</b>					
28 Amount you wish to donate to one or more of the following voluntary contribution funds:					
Alzheimer's	a	Breast Cancer	e	Diabetes	i
Child Abuse	b	Multiple Sclerosis	f	Autoimmune	j
Alzheimer's	c	Military Family	g	Lung Cancer	k
Homeless	d	IL Veterans' Home	h		
Add Lines a through k. This is your donations total.		28			
29 Add Line 27 and Line 28. This is your total penalty and donations.		29	4.		
<b>Step 11: Refund or Amount You Owe</b>					
30 If you have an overpayment on Line 25 and this amount is greater than Line 29, subtract Line 29 from Line 25.		30	0.		
31 Amount from Line 30 that you want applied to 2008 estimated tax		31			
32 Subtract Line 31 from Line 30. This is your <b>refund</b> .		32	0.		
<b>Direct Deposit</b>	33 Complete to direct deposit your refund				
	Routing number <input type="checkbox"/> Checking or <input type="checkbox"/> Savings				
Account number					
See instructions for payment options.	34 If you have tax due on Line 26, add Lines 26 and 29. <b>OR</b>				
	If you have an overpayment on Line 25 and this amount is less than Line 29, subtract Line 25 from Line 29. This is the <b>amount you owe</b> .	34	1,021.		
<b>Step 12: Sign and Date</b>					
Under penalties of perjury, I state that I have examined this return, and, to the best of my knowledge, it is true, correct, and complete.					
Your signature _____ Date _____		Daytime phone number _____ Your spouse's signature _____ Date _____			
Paid preparer's signature _____ Date _____		708-452-4377 P00759592			
		Preparer's phone number Preparer's FEIN, SSN, or PTIN			
If no payment enclosed, mail to: ILLINOIS DEPARTMENT OF REVENUE SPRINGFIELD IL 62719-0001		If payment enclosed, mail to: ILLINOIS DEPARTMENT OF REVENUE SPRINGFIELD IL 62726-0001			
IL-1040 Page 3 (R-12-07) ID: 3088 DR _____ AP _____ CA _____ DE _____ EV _____ ME _____ MO _____ PR _____ RM _____ RR _____ TT _____ TV _____ WA _____ WT _____ WV _____ ZZ _____ ID _____					

# IL-2210 Computation of Penalties for Individuals 2007

Attach to your Form IL-1040

IL Attachment No. 10

**Read this information first - For original returns only.** Do not use this form if you are filing Form IL-1040-X, Amended Individual Income Tax Return, after the extended due date of the return. We encourage you to let us figure your penalties and send you a bill instead of completing and filing this form yourself.

## Step 1: Provide the following information

- 1 This form is for calendar year 2007 or for fiscal year beginning \_\_\_\_\_, and ending \_\_\_\_\_  
Month Year Month Year
- 2 Write your name as it appears on your Form IL-1040. 2 DIMITAR POPOV and MARIYA POPOVA
- 3 Write your Social Security number as it appears on this year's Form IL-1040. 3 637-70-0628
- 4 If your prior year Form IL-1040 was filed using a different Social Security number than the number shown on Line 3, write that number here. 4

## Step 2: Figure your required installments

	A This year	B Last year
5 Write the amount of your total income tax from each Form IL-1040. See instructions.	<u>5 1,770.</u>	<u>757.</u>
6 Write the amount of credits from each Form IL-1040. See instructions.	<u>6 178.</u>	<u>133.</u>
7 Subtract Line 6 from Line 5.	<u>7 1,592.</u>	<u>624.</u>
8 Write the total amount of this year's Illinois withholding from your W-2 forms.	<u>8 575.</u>	
9 Subtract Line 8 from Line 7.	<u>9 1,017.</u>	
10 Multiply Column A, Line 7, by 90% (.9).	<u>10 1,433.</u>	
11 If Line 9 is \$500 or less, write "0." and go to Step 3. Otherwise, write the lesser of Column A, Line 10, or Column B, Line 7.	<u>11 624.</u>	
12 Divide the amount written on Line 11 by four. This is the amount of each required installment. (If you use the annualized income installment method, see instructions.)	<u>12 156.</u>	
	Quarter 1 April 17, 2007	Quarter 2 June 15, 2007
13 Write the required installment. See instructions.	<u>156.</u>	<u>156.</u>
14 Write any credit carried forward from the prior year and the amount withheld. See instructions.	<u>144.</u>	<u>144.</u>
15 Subtract Line 14 from Line 13. If the amount is negative, use brackets.	<u>12.</u>	<u>13.</u>
16 If the amount on Line 17 of the previous quarter is negative, write that amount as a positive here. Otherwise, write "0."	<u>0.</u>	<u>0.</u>
17 Subtract Line 16 from Line 15. If the amount is negative, use brackets.	<u>12.</u>	<u>13.</u>
	Quarter 3 September 17, 2007	Quarter 4 January 15, 2008
	<u>156.</u>	<u>156.</u>
	<u>144.</u>	<u>143.</u>
	<u>12.</u>	<u>13.</u>
	<u>0.</u>	<u>0.</u>
	<u>12.</u>	<u>13.</u>

## Step 3: Figure your unpaid tax

- 18 Write the amount from Column A, Line 7. 18 1,592.
- 19 Add your credit carried forward from the prior year, your total estimated payments made this year, and your withholding as shown on your W-2 forms. Compare that total to either the amount written on Line 11, or, if you annualized, the total of Line 13, Quarters 1 through 4, and write the greater amount here. 19 624.
- 20 Write other payments made on or before April 15, 2008.
  - a Write the amount and the date of your Form IL-505-I. 20a 0. Date: \_\_\_\_\_
  - b Write the amount and the date of any other payment. 20b 1,017. Date: 04/15/2008
- Add Lines 20a and 20b. Write the amount here. 20 1,017.
- 21 Add Lines 19 and 20. Write the total amount here. 21 1,641.
- 22 Subtract Line 21 from Line 18. If the amount is
  - **positive**, write that amount here. Continue to Step 4, and write this amount in Penalty Worksheet 1, Line 24, Column C.
  - **zero or negative**, write that amount here; if negative use brackets. Continue to Step 4, skip Penalty Worksheet 1, and go to Penalty Worksheet 2. You may apply this amount to any underpayment when figuring your Penalty Worksheet 2. See instructions.

22 -49.



### Step 4: Figure your late-payment penalty

Use Penalty Worksheet 1 to figure your late-payment penalty for unpaid tax.  
Use Penalty Worksheet 2 to figure your late-payment penalty for underpayment of estimated tax.  
**NOTE:** You **must** follow the instructions in order to properly complete the penalty worksheets.

#### Penalty rates

Number of days late	Penalty rate
1 - 30	.02
31 or more	.10

### Penalty Worksheet 1 - Late-payment penalty for unpaid tax

23 Write the amount and the date of any payment you made **on or after** April 16, 2008. See instructions.

Amount	Date paid
a 0.	
b	

24 Write the amount from Line 22 on the first line of Column C below.

A	B	C	D	E	F	G	H	I
Period	Due date	Unpaid amount	Payment applied	Balance due (Col. C - Col. D)	Payment date	Number of days late	Penalty Rate See table	Penalty
Return April 15, 2008		0.	0.	0.		0	.00	0.

25 Add Column I. This is your **late-payment penalty for unpaid tax**.

Write the total amount here and in Step 5, Line 32.

25 0.

**NOTE:** You may apply any remaining overpayment in Column E above to any underpayment when figuring the Penalty Worksheet 2.

### Penalty Worksheet 2 - Late-payment penalty for underpayment of estimated tax

**NOTE:** If you paid the required amount from Line 17 by the payment due date for each quarter, **do not** complete this worksheet.

26 Write the amount and the date of each estimated income tax payment you made. See instructions.

#### Estimated Income Tax Payments

Amount	Date paid	Amount	Date paid	Amount	Date paid
a 0.		c 0.		e	
b 0.		d 0.		f	

27 Write the unpaid amounts from Step 2, Line 17, Quarters 1 through 4, on the first line of the appropriate quarters in Column C below.

A	B	C	D	E	F	G	H	I
Period	Due date	Unpaid amount	Payment applied	Balance due (Col. C - Col. D)	Payment date	Number of days late	Penalty Rate See table	Penalty
Qtr 1 April 17, 2007		12.	49.	-37.	04/15/2008	364	.10	1.
		0.	0.	0.		0	.00	0.
		0.	0.	0.		0	.00	0.
		0.	0.	0.		0	.00	0.
Qtr 2 June 15, 2007		12.	37.	-25.	04/15/2008	305	.10	1.
		0.	0.	0.		0	.00	0.
		0.	0.	0.		0	.00	0.
		0.	0.	0.		0	.00	0.
Qtr 3 Sept. 17, 2007		12.	25.	-13.	04/15/2008	211	.10	1.
		0.	0.	0.		0	.00	0.
		0.	0.	0.		0	.00	0.
		0.	0.	0.		0	.00	0.
Qtr 4 Jan. 15, 2008		13.	13.	0.	04/15/2008	91	.10	1.
		0.	0.	0.		0	.00	0.
		0.	0.	0.		0	.00	0.

28 Add Column I, Quarters 1 through 4. This is your **late-payment penalty for underpayment of estimated tax**.

Write the total amount here and on your Form IL-1040, Line 27.

28 4.

### Step 5: Figure your late-filing penalty and the amount you owe

**NOTE:** Figure your late-filing penalty only if

- you are filing your Form IL-1040 after October 15, 2008; and
- your tax was not paid by April 15, 2008.

#### Figure your late-filing penalty.

29 Write the amount from Form IL-1040, Step 6, Line 15, minus any timely payments and credits. 29 0.

30 Multiply the amount on Line 29 by 2% (.02). 30 0.

31 Write the lesser of Line 30 or \$250. This is your late-filing penalty. 31 0.

#### Figure the amount you owe.

32 Write any late-payment penalty for unpaid tax from Step 4, Line 25. 32 0.

33 Write any late-filing penalty from Step 5, Line 31. 33 0.

34 Write the amount you owe from your Form IL-1040, Step 11, Line 34. 34 1,021.

35 Add Lines 32 through 34 and write the total here. This is your total tax and penalties. 35 1,021.

See Form IL-1040, Line 34 instructions for all your payment options.

### Step 6: Complete the annualization worksheet for Step 2, Line 13

Complete this worksheet **only** if your income was not received evenly throughout the year and you choose to annualize your income. Complete Lines 36 through 52 of one column before going to the next, beginning with Column A.

	A January 1, 2007 to March 31, 2007	B January 1, 2007 to May 31, 2007	C January 1, 2007 to August 31, 2007	D January 1, 2007 to December 31, 2007
36 Write your Illinois base income for each period. See instructions. 36	0.	0.	0.	0.
37 Annualization factors. 37	4	2.4	1.5	1
38 Multiply Line 36 by Line 37. This is your annualized income. 38	0.	0.	0.	0.
39 Exemptions. See instructions. 39	0.	0.	0.	0.
40 Subtract Line 39 from Line 38. This is your Illinois net income. 40	0.	0.	0.	0.
41 Multiply Line 40 by 3% (.03). 41	0.	0.	0.	0.
42 For each period, write the amount you wrote in Step 2, Column A, Line 6. 42	0.	0.	0.	0.
43 Subtract Line 42 from Line 41. 43	0.	0.	0.	0.
44 Applicable percentage. 44	22.5% (.225)	45% (.450)	67.5% (.675)	90% (.900)
45 Multiply Line 43 by Line 44. This is your annualized installment. 45	0.	0.	0.	0.
46 Add the amounts on Line 52 of each of the preceding columns and write the total here. 46	Skip this line for Column A	0.	0.	0.
47 Subtract Line 46 from Line 45. If less than zero, write "0." 47	0.	0.	0.	0.
48 Write the amount from Step 2, Line 12, in each column. 48	0.	0.	0.	0.
49 Write the amount from Line 51 of the preceding column. 49	Skip this line for Column A	0.	0.	0.
50 Add Lines 48 and 49. 50	0.	0.	0.	0.
51 If Line 50 is greater than Line 47, subtract Line 47 from Line 50. Otherwise, write "0." 51	0.	0.	0.	Skip this line for Column D
52 Write the lesser of Line 47 or Line 50 here and on Step 2, Line 13. This is your required installment. 52	0.	0.	0.	0.

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Maria Popova (Wife)	National City Mortgage Po Box 1820 Dayton, OH 45401

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE:

Popov, Dimitar

Case No. \_\_\_\_\_

Chapter 7

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ **676.00**

Prior to the filing of this statement I have received ..... \$ **351.00**

Balance Due ..... \$ **325.00**

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
  - e. [Other provisions as needed]
6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**February 27, 2009**

Date

**/s/ Nicolette Robovsky**

**Nicolette Robovsky 6278336  
Gleason & Gleason  
77 W Washington, Ste 1218  
Chicago, IL 60602  
(312) 578-9530 Fax: (312) 578-9524**

Certificate Number: 00437-ILN-CC-005453915

### **CERTIFICATE OF COUNSELING**

I CERTIFY that on November 19, 2008, at 2:45 o'clock PM MST,

Dimitar N Popov received from

Black Hills Children's Ranch, Inc

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the  
Northern District of Illinois, an individual [or group] briefing that complied  
with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of  
the debt repayment plan is attached to this certificate.

This counseling session was conducted by telephone.

Date: November 19, 2008

By /s/Juliana Tomek

Name Juliana Tomek

Title Credit Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

IN RE:

Case No. \_\_\_\_\_

Popov, Dimitar

Chapter 7

Debtor(s)

**DECLARATION REGARDING ELECTRONIC FILING**

Signed by Debtor(s) or Corporate Representative

**To Be Used When Filing over the Internet****PART I - DECLARATION OF PETITIONER**Date: 12/19/08

A. To be completed in all cases.

I (We) Dimitar Popov and \_\_\_\_\_, the undersigned debtor(s), corporate officer, partner, or member, hereby declare under penalty of perjury that the information I(we) have given my (our) attorney, including correct social security number(s) and the information provided in the electronically filed petition, statements, schedules, and if applicable, application to pay filing fee in installments, is true and correct. I(we) consent to my(our) attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I(we) understand that this DECLARATION must be filed with the Clerk in addition to the petition. I(we) understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.

B. To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.

☒ I(we) am(are) aware that I(we) may proceed under chapter 7, 11, 12, or 13 of Title 11 United States Code; I(we) understand the relief available under each such chapter; I(we) choose to proceed under chapter 7; and I(we) request relief in accordance with chapter 7.

C. To be checked and applicable only if the petition is a corporation, partnership, or limited liability entity.

☐ I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in the petition.

Signature: \_\_\_\_\_

(Debtor or Corporate Officer, Partner or Member)

Signature: \_\_\_\_\_

(Joint Debtor)